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ABSTRACT

Emphasizing the effects of changes in social policy on black children, this report describes the federal administration's proposed and completed funding for social programs for fiscal years 1982-85 and outlines strategies for those interested in affecting program policy. Social programs are grouped under three main headings: (1) health and child nutrition, (2) education and Head Start, and (3) family supports. Each of these sections begins with a short fictional vignette of a black family in need of services. Each section also describes the programs in detail, traces administrative and congressional actions on these programs in fiscal years 1982-84, and discusses the President's funding proposals for fiscal year 1985 and their projected impact. Statistics are given on the participation of black women and children in these programs and on the decline in the numbers served due to budget cuts. The report concludes with a discussion of different avenues that individuals can take to influence public policy. These include developing telephone strategies, writing letters to congressional representatives, taking budget surveys, and involving the community in discussing these issues. Two appendices provide a description and history of 12 federal social service programs that affect children and a glossary of terms used in discussing the federal budget. (Author/CB)

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Who Bears The Burden?

Black Children In America:

Impact of the President's FY '85 Budget Proposals

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Black Children In America:

Impact of the President's FY '85 Budget Proposals.

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INTRODUCTION

The much-heralded recovery presently being touted by the Reagan Administration has somehow lost its way to the Black communities of America. As this analysis so clearly points out, the situation for thousands of Black families and their children grows more desperate daily as, one by one, programs which have helped them "hang on" and "hang in" are being destroyed by the blade of the budget hatchet.

In an effort to portray just "what is happening" in many of our communities, we have used vignettes with fictional characters in what we know to be real life, day-to-day struggles of many Black families trying to cope with the removal of programs that have been vital to their survival. In addition, we have set forth the accumulated cuts ushered in by the passage of President Reagan's Omnibus Budget Reconciliation Act of 1981.

Finally, we have set forth tools for action that can be used by you, our constituents. We have not just made the standard listing of "What You Can Do," but rather, we have gone a step further in giving you sample activities that can be adapted to local use. We urge you to use the surveys and letters - making necessary modifications so that they better fit your local community. Through conducting your own local program budget analyses, you will become better informed and better advocates. It is imperative that you -- friends, parents, supporters, and members of NBCDI--speak out against the removal of supportive services from Black communities across America. We must organize, we must hold public education forums, we must conduct local and state budget analyses -- and we must do this now!

These are very grave times for our Black children -- with one of every two being born into poverty. However, it is often said that it is "darkest" just before the "dawn". Let us, the protectors of our children insure that "dawn" does come -- and comes soon!

Evelyn K. Moore
Executive Director
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Development Institute

Ever since the U.S. steel plant in which he had worked for fifteen years announced that it was closing permanently after phased lay-offs, the scramble for new employment has shaped James Johnson's every waking hour. He wants to work -- has worked since he was in high school -- but there are just no jobs in town for semi-skilled steel casters. There are no jobs in other close communities either, as the 4500 men and women in steel-related occupations who meet each other constantly at the unemployment office are well aware. This is about to change for James Johnson, however. In two weeks, his extended unemployment benefits expire. He is, he says with a sigh, dispirited. It's still hard for a Black man in America to make it.

His wife, Mattie Johnson, as she says, works and worries, but mostly worries. She has seen the family income plunge from a reasonable $25,000 or more (depending on her own contribution from part-time employment) to the $9,000 she can earn as a clerk-typist for a small computer company. This means fewer fresh fruits, vegetables, and meats for her family at supper time.

She worries about her three children, especially little Jamie, who has been diagnosed as having chronic asthma. This condition eats up funds for medication and causes lost workdays waiting at crowded clinics and emergency rooms when Jamie has attacks. Mattie's employer does not provide health insurance, but it never seemed important when James had comprehensive health insurance coverage at his job. Now, she hopes that the family might be eligible for Medicaid or some other publicly supported health service.

The Johnsons are beginning to believe that "when it rains, it pours." Mattie hadn't felt well for weeks and even missed a few days of work -- something that she would never do otherwise because Jamie's illness often requires absences. With great apprehension, Mattie Johnson visited her doctor, and her fears were confirmed. The Johnsons feel that they have no choice but to welcome another baby into the family. This decision was the result of anguished discussions between them. The whole question of health care and proper nutrition for Mattie during the pregnancy -- in light of her doctor's concern about Mattie's anemia -- has worried both Johnsons. They also are worried that Mattie may lose her job, since her employer has neither a maternity leave policy nor health insurance coverage. For the Johnsons, without new

employment opportunities for James or adequate health care for Jamie and Mattie, the future looks bleak and problem-ridden.

Protecting the Health of Our Children

The physical well-being of our children is critical to their overall development

Many Black families, like the Johnsons, who are unable to earn a decent income, are frustrated and often thwarted in their efforts to provide for the health of their children. The physical well-being of Black children is vital to their overall development into healthy, productive adults. For without good health, children cannot realize their potential or fully take advantage of opportunities for furthering their education, social development, or emotional growth. Thus, the federal programs aimed at protecting the health of our children are essential. The Medicaid Program; Special Supplemental Food Program for Women, Infants and Children (WIC); Commodity Supplemental Food Program (CSFP); and Maternal and Child Health (MCH) Block Grant are some of the major federal initiatives which provide services to help children from low-income families remain healthy.

Good health care: a basic right

The Medicaid Program provides medical insurance for basic health services. Of the 22.5 million participants in this program, forty-seven percent (47%) are Black, and 11 million are children. Black families, like the Johnsons, would greatly benefit from the insurance provided by this program. If the Johnson family met the eligibility criteria, Medicaid would cover the cost of Jamie's asthma treatment, and Mattie Johnson would have access to proper prenatal care to protect the health of her unborn child. Unfortunately, although Medicaid has been instrumental in safeguarding the health of many Black children who are vulnerable to health problems associated with poverty, the current administration has repeatedly attacked this program.

The Child Nutrition Programs ensure that participating children are provided nourishing meals and snacks while at school or in out-of-home child care settings. There are approximately 3.6 million children from low-income families participating in the School Breakfast Program, two million in the School Lunch Program and two million -- primarily from urban areas -- in the Summer Food Program. These and the other nutrition programs are of great importance to children whose parents, like James and Mattie, cannot afford to provide the optimum diet for

their children. However, similar to Medicaid, these programs too have been reduced over the past three years.

WIC and CSFP are targeted at facilitating the availability of nutritious meals for low-income, pregnant/nursing women and children under five. WIC currently serves 2.25 million women and children, and in 1981, CSFP served 134,000 women and children, sixty-nine percent (69%) of whom were Black. Good nutrition is particularly important to children during their earliest stages of development to prevent such conditions as low birth weight in babies and iron-deficiency anemia in older children, two conditions which are prevalent among Black people. The Johnson family would be more confident in welcoming its new member into the family if Mattie could take advantage of this program. She would rest assured that while she was pregnant, she received the nutrients necessary for her unborn child to develop normally.

An investment in the health of Black children is an investment in the future

The various services provided by the Maternal and Child Health Block Grant are essential to the health of low-income Black women and children throughout the nation. In 1980, approximately 15 million pregnant/nursing women and children received prenatal care, check-ups, and immunization through this program. In 1981, four million young women and mothers received family planning and health education services at a documented savings of $1.80 for each $1.00 in program funding. However, there are many Black women and children who have not been able to take advantage of the Block Grant. For example, twelve percent (12%) of Black women under the age of 20 who gave birth in 1980 received no prenatal care or care only in their third trimester. With decreases and freezes in funding for this program, one can only hope that Mattie Johnson does not become another statistic.

The Medicaid Program, Child Nutrition Programs, WIC/CSFP, and Maternal and Child Health Block Grant, when viewed together, comprise a comprehensive medley of programs to protect and maintain the health of low-income children almost from conception to the age of eighteen. Many Black children who live in poverty, who often receive inadequate nutrition at home, and who would otherwise receive health services sporadically or only when a condition has become acute, greatly benefit from these programs. Providing adequate, comprehensive health care to Black children is equivalent to investing in the future of the Black community.

Tracing Budget Actions, FY 82 to FY 84: Health and Child Nutrition

The President's attempts to curb federal spending are seemingly made with little consideration of costs to individuals who are already suffering from the by-products of our economic system -- unemployment and poverty. In the area of health care, the Administration has shown a lack of regard for low-income families and children. During the Reagan Administration, Medicaid, Child Nutrition, WIC/CSFP, and the MCH Block Grant have all suffered cuts which ultimately decrease their effectiveness.

Medicaid, FY 82 to FY 84

Soaring health care costs frustrate low income Black families

The current administration has repeatedly attacked the Medicaid Program. The Omnibus Reconciliation Act of 1981 provided that each state's reimbursement level would be reduced by three percent (3%) in FY 82, four percent (4%) in FY 83, and four and one half percent (4.5%) in FY 84. States could "earn back" these funds if they had:

- a successful hospital rate review program,
- an unemployment rate exceeding 150 percent of the national average,
- a record of recovering more than one percent (1%) of federal expenditures through anti-fraud efforts, or
- a record of program spending below set target levels.

This legislation sought to reduce projected Medicaid spending in the FY 82 to FY 85 period by one billion dollars.

In FY 82, the President proposed placing a ceiling on Federal spending for Medicaid. Fortunately, Congress rejected this proposal. However, in another bill, States were granted permission to charge nominal co-payments for all but a select number of services, exempting those for children under 18 and those related to pregnancy, family planning, and emergencies.

The requirements that States hold growth down when inflation in the health care sector has reached astronomical levels has alarmed

States forced to cut health services

States, and they have responded by cutting services such as coverage for hospital stays, physician services, and prescription drugs. Of particular concern is the number of families who have lost their AFDC benefits and, consequently, their Medicaid eligibility. One informal survey concluded that by the end of FY 82, almost 700,000 children were no longer participating in Medicaid because they had lost their AFDC cash benefits.

The Administration attempted to "save" $330 million in predicted FY 84 Medicaid expenditures by:

- mandating that States charge a co-payment for physician's services, hospital stays, and clinic services,
- extending beyond FY 84, for an indefinite period, the reduction in federal payments to States included in the Omnibus Reconciliation Act of 1981; the rate of reduction required for FY 84 would be set at three percent (3%) rather than four and one half percent (4.5%), and
- reducing the number of AFDC-eligible persons which, in many cases, automatically decreases the number of participants in Medicaid.

Congress rejected these proposals and expanded coverage of children and pregnant women.

Child Nutrition, FY 82 to FY 84

Taking food from the mouths of children

Despite the fact that the child nutrition programs help to meet one of the most basic human needs of children, the President has hacked away at their very foundation since he took office. Legislation enacted in 1981 not only reduced benefits in the Child Care Food Program by thirty percent (30%) but also decreased the number of meals and snacks for which child care facilities are reimbursed, reduced the snack reimbursement rate, changed the income-eligibility guidelines, and eliminated assistance for purchasing food service equipment. The cuts sustained in this program, coupled with changes made in other child care support programs such as the Title XX block grant and the elimination of the CETA Program, have made the operation of child care centers very difficult, and many have closed.

The effectiveness of the Summer Food Program has also been diminished by the policies of the current administration. First, the 1981 legislation reduced the number of locales that can benefit from this program. The percentage of poor families residing within a geographic area was increased from thirty percent (30%) to fifty percent (50%) of the total population for the area to qualify for this program. Second, legislation has been enacted which has made it impossible for the more traditional, non-profit, community-based organizations to sponsor the program. Only public or non-profit, residential summer camps and units of local, municipal, or state governments are currently eligible.

Four hundred thousand children pushed out of School Breakfast Program

As a result of budget cuts and program changes, many children are no longer being guaranteed access to meals while away from home. In FY 82, the School Breakfast Program was reduced by twenty percent (20%). This means that more than 400,000 low-income children, many of whom are Black, have been forced out of the program. In the same year, the Administration slashed funding for the School Lunch Program by thirty percent (30%). As a result, three million children are no longer participating. In addition, the Summer Food Program was cut in half. During the summer of 1982, only one million children participated. Finally, the Special Milk Program, reduced by more than eighty percent (80%), has been entirely eliminated in schools with lunch programs.

For FY 84, the President again pushed for the conversion of the child nutrition programs into one general nutrition assistance block grant, and again, Congress resisted his efforts. The FY 84 appropriation level is three billion dollars for these programs.

WIC/CSFP, FY 82 to FY 84

In the President's budget proposals for FY 82, the WIC program was cut by thirty percent (30%). If the proposal had been enacted, almost one million women and children would have been dropped from the program. Congress, unable to accept this proposal, instead funded WIC at $904 million, a four percent (4%) cut from 1981, which allowed 2.1 million women and children to be served, a decrease of 150,000 program participants since the inception of the Reagan Administration. CSFP was funded at $29.5 million, an increase of about eight

Advocates fight and win a victory

percent (8.4%). The President's budget for FY 83 included a proposal to merge WIC and CSFP functions with the Maternal and Child Health Block Grant in a new "Services for Women, Children" Block Grant. These programs would have been funded at one billion dollars for FY 83. Fortunately, both WIC and CSFP continued to enjoy the strong support of Congress, which never formally considered the proposal. Instead, Congress funded the WIC program at $1.06 billion and allocated $32.6 million to CSFP, a total of almost $1.1 billion in FY 83. In FY 84, the programs received $1.28 billion. This represents a steady increase in the funding level for the two programs over the past three years.

MCH Block Grant, FY 82 to FY 84

Bleak days for Black people: health clinics close and costs increase

The Omnibus Budget Reconciliation Act of 1981 consolidated 21 categorical health block grants into four grants, one of which is Maternal and Child Health. Hemophilia treatment, adolescent health services, genetic diseases, lead-based paint poisoning prevention, sudden infant death syndrome, rehabilitation for disabled children entitled to Supplementary Security Income, Title V Maternal and Child Health Services, and Crippled Children's Services are all included in this block grant. During FY 81, these programs received a total of $455 million in appropriations, and the Title V requirement that States maintain comprehensive health services projects was eliminated. In FY 82, the Maternal and Child Health Block Grant -- purportedly its replacement -- was allocated only $348 million, a reduction of twenty-four percent (24%).

Currently, the maximum allowable allocation for the grant is $373 million, which it received in FY 83. Nevertheless, this "full funding" represents a level significantly lower than the total which these programs were permitted to receive separately, prior to their being placed in a block grant. The cuts and changes suffered by the programs included in the Maternal and Child Health Block Grant have led to the closing of many clinics, decreases in services provided, fewer women and children served, and reductions in program staff size. Consequently, Congress had to provide supplemental funding to the MCH Block Grant through the Emergency Jobs Bill (Public Law 98-8). The additional $105 million was necessary to make maternal and child health services available to the unemployed and their families.

The Administration proposed freezing funding for FY 84 at the same level as FY 83 -- which translates to a reduction in spending. However, Congress appropriated $399 million for the MCH Block Grant.

FY 85 Proposals and Predicted Impact: Health and Nutrition

Persistent attempts to cut health care programs

In general, the President's proposals for FY 85 are consistent with his past efforts to reduce federal spending by cutting social services programs. His proposed reductions in health programs are no exception to this rule.

Medicaid

FY 85 Budget Proposal. The goal of the Reagan Administration in FY 85 is to reduce Medicaid expenditures by one billion dollars. Following a program containment plan laid out previously, the President has reintroduced or extended several proposals from the FY 84 budget designed to achieve these "savings." These initiatives are as follows:

1) Reduce Medicaid costs by reducing AFDC benefits. Because AFDC recipients are automatically eligible for Medicaid, any reduction in their numbers will result in a "savings" for the Medicaid program.

2) Require States to implement a co-payment plan for Medicaid recipients for services rendered. To prevent recipients from "unnecessary utilization," they must share in their health care costs with the government. Co-payments would apply to both inpatient and outpatient services provided by physicians, hospitals, and clinics.

3) Extend the reduction in federal payments to States as proposed in the 1981 Omnibus Reconciliation Act. For FY 85, the federal matching rate reduction would be set at three percent (3%). The purpose of the reduction, according to the Administration, is to create incentives for the States to moderate the rate of growth in their Medicaid expenditures. States can offset their reduction by one percent (1%) if they have successful

hospital rate review programs, unemployment rates exceeding 150 percent of the national average, fraud and abuse recoveries more than one percent (1%) of federal expenditures, or a record of spending below set target levels.

The Administration expects program costs for Medicaid to reach $22.1 billion in FY 85. Although this would be a nine percent (9%) increase over the FY 84 appropriation level, given the exorbitant inflation rate in health care costs, this increase is negligible.

Cuts in Medicaid: Endangering the lives of Black children

Impact. The effect of the Administration's Medicaid proposals would be to lessen the federal responsibility and commitment toward a program which represents the only source of health care for thousands of poor people. This comes at a time when the poverty rate is increasing due to rising unemployment levels, and health care costs which are skyrocketing. Because Black people have always represented a disproportionately large percentage of poor people, their health and well-being is especially endangered by any reductions in the Medicaid program. Fifty percent (50%) of Black children are born into poverty, and presently, almost half of all Medicaid recipients are Black.

As the system now stands, the distribution of the Medicaid dollar is lopsided, with the greater percentage going to inpatient care, as opposed to outpatient, preventive care. Because adults represent the majority of inpatients, many children are being shortchanged. In Ohio, for example, eighty cents of every Medicaid dollar goes to inpatient and long-term nursing care. Only twenty cents goes to outpatient care.

In examining the FY 85 Medicaid proposals, the Congressional Budget Office has calculated the savings to be considerably less than the Administration's estimates -- approximately $600 million as opposed to one billion dollars. This is significant because it suggests that the Administration's cost-containment program may be less effective than anticipated. Indeed, the entire thrust of President Reagan's program is negative rather than positive. It calls for:

- penalizing States for failing to hold their growth rates down through a reduction in federal matching rates,
- restricting eligibility criteria,

- emphasizing client control, and
- focusing on administrative as opposed to health care inefficiencies in the system.

A forced choice: jobs or healthy children

Among those losing their AFDC benefits are working poor, that is, "medically needy" people who cannot receive public assistance because of their jobs, but who nevertheless cannot afford medical coverage. Many working mothers are forced to choose between their jobs and the health of their children because when they work, they lose their Medicaid benefits. This is of particular consequence to the Black community where forty-eight percent (48%) of Black infants are born into single-parent households.

Cost-containment: A punishment not a solution

Cost-sharing may reduce "utilization of services," but it is not an effective way to save money. With extremely limited funds, having to produce even "nominal" cash payments, coupled with transportation costs, will discourage persons from visiting the doctor or clinic for minor or basic preventive care. Instead, clients will seek medical care during emergency situations, or when the condition becomes more critical, thus requiring more expensive care. Recent studies in Texas and California have documented this negative effect of cost-sharing.

Forcing the poor into the emergency rooms

At the state level, the loss of federal dollars and the imposition of more stringent eligibility requirements have meant not only a decrease in the number of recipients but also a reduction in the number of services provided under the program. Medical equipment such as crutches and braces, prescribed drugs, and prenatal care are some of the essential benefits that have been cut during previous years when the reduced rates were operative. Without federal leadership and economic support, States will not be able to deliver, even where the health care of their residents -- especially the poor and Blacks -- is a high priority.

The Reagan Administration, in its efforts to contain program costs, has continued to propose measures -- such as the institution of co-payments -- which impede Medicaid clients' access to health care. However, the result of such a strategy may in fact be increased program cost. For example, if co-payments are required, many participants will delay seeking medical attention until they have become acutely ill. Therefore, the cost of medical care will be significantly higher. If, instead, access to health care is facilitated, many low-income

parents will seek early, professional care for themselves and their children.

Prevention: Cost-effective protection

In addition, health education and preventive care should become a primary focus of the Medicaid program. An understanding of preventive care and the importance of early detection of health problems will help to reduce the cost of Medicaid by decreasing the need for hospital stays and emergency services. Thus, cost savings will be realized, and the health of low-income children will be better protected.

NEEDED: Mandate the AFDC Unemployed Parent Program in all states.

Insure that all potentially eligible families and children are aware of eligibility rules in AFDC and food stamps.

Mandate Medicaid coverage for first-time pregnant women.

Mandate employers to provide health protection for 90 days after lay-off.

Mandate Medicaid coverage for all SSI recipients.

The aforementioned provisions are contained in the Omnibus Anti-Poverty Act of 1984, H.R. 4920, introduced by Representatives Charles Rangel (D-NY), Harold Ford (D-TN), and Henry Waxman (D-CA).

Child Nutrition Programs

FY 85 Budget Proposal. The focus of this budget analysis will be limited to a discussion of the Child Care Food Program (CCFP), the School Lunch and Breakfast Programs, and the Summer Food Program. Each of these programs has been essential in addressing the basic nutritional needs of hundreds of thousands of low-income children across the country.

The President's budget proposes several changes in the child nutrition programs. These budget proposals are:

- Convert the CCFP and the Summer Food Program into a block grant; the projected cost of the block grant in FY 85 would then be frozen for future year spending.

- Tie the reimbursement rate for the School Lunch Program to a food price index, and lower the reimbursement rates for reduced-price lunches.

- Implement procedures for income verification which will "make the best use of offices in the State with the ability to independently verify income information."

Impact on Services. Last year, President Reagan proposed a general child nutrition block grant which would have combined the CCFP, the School Breakfast Program, and the Summer Food Program, and reduced funding by approximately thirty percent (30%). This proposal was rejected with substantial bipartisan agreement. Members of Congress were in basic agreement concerning the important role the federal government must play in nutrition. This year, with the recommendation of the President's Task Force on Food Assistance Programs, the Administration has proposed to block grant the CCFP and Summer Food Service Program.

The denial of nutrition assistance

This year's proposal does include a projected cost estimate for FY 85 based on current funding levels ($443.7 million). However, the proposal assumes that the Head Start portion of the CCFP will be transferred from the Department of Agriculture to the Department of Health and Human Services. The net result of such a proposal would be the denial of nutrition assistance to deserving children. If the funding level for the proposed block grant is frozen at FY 85 levels, the entitlement status of the program is eliminated, and reimbursement rates would not necessarily be indexed for increases in food prices.

Currently, the cost of school lunches which are provided at reduced price rates is reimbursed by the federal government and student payments. Under the budget proposal for FY 85, increases in meal prices which may result from increases in the food price index will be passed on to the student, unless school districts are able to absorb the additional cost. Currently, such increases are assumed by the federal government. In these times of social and economic deprivation, it is unreasonable to impose on students who qualify for reduced price meals the cost of food price inflation.

Finally, the recommendation of the Department of Agriculture to switch the function of income verification from State Departments of

An unnecessary social stigma

Education to agencies more suited for such functions (i.e., the public welfare department), would foster an unnecessary social stigma to the program. Also, procedures and criteria employed in eligibility determination by public welfare offices is not the same as that currently applied -- and adequately so -- by State Departments of Education for the School Lunch Program.

NEEDED: Restoration of $150 million (contained in H.R. 4091 and S. 1913) for the School Breakfast, School Lunch, Special Milk, CCFP, and Nutrition Education and Training Program.

Reauthorization of the following programs:

- The Special Supplemental Food Program for Women, Infants and Children (WIC);
- The Summer Food Service Program;
- The Nutrition Education and Training Program;
- The State Administration Expense Program; and
- Section 14 of the National School Lunch Program (authorization to distribute commodities).

WIC/CSFP

FY 85 Budget Request. In spite of the hunger that haunts millions of America's Black children, the President's FY 85 budget proposes new cuts to take even more food out of the mouths of our children. Specifically, the FY 85 budget estimates outlays to be $1.2 billion. This represents a $100 million reduction from current program appropriations and a devastating blow to thousands of Black women and their children. In addition to the President's proposed cuts, WIC is further threatened by having only enough funds to operate until July 10. Unless a supplement is received as requested by the Congress, WIC is in grave jeopardy.

Impact on Services. The impact of further reducing a basic food program such as WIC is surely a disaster, but even more tragic, it is life threatening to Black infants, toddlers, and preschoolers. Estimates as high as 500,000 are being given for the total number of pregnant women who will be cut from the Special Supplemental Food Program for Women, Infants and

Defenseless children face hunger

Children. Of the 2.1 million recipients in 1980, 122,000 were Black women, 183,000 were Black infants, and 366,000 were Black children ages 1 to 5. It seems that it is not enough for the adult Black person to constantly face the day-to-day, double edged sword of poverty and discrimination -- but now defenseless children must face hunger.

Current statistics portray the plight of the youngest of our young:

- Fifty percent (50%) of Black children are born into poverty.
- Forty-eight percent (48%) of Black children live in single-headed households.
- Seventy percent (70%) of all Black families living in poverty are headed by women.
- Black children suffer from diseases and illnesses at twice the rate of white children during their first year of life.

Of equal concern and significance is the growing number of Black children being born to adolescent mothers. At risk here is the proper diet of these young women which can determine the healthy or unhealthy status of their children. We know that conditions such as anemia, iron deficiency, and hypertension have their roots in diet deficiencies. We know that the Black community already has a higher rate of low-birth-weight babies, malnutrition, and infant mortality.

If the Reagan proposed cuts become a reality, many youngsters will be born with defects and deficiencies that could have easily been prevented. Thus, the cutback in WIC, coupled with cutbacks in Medicaid, two basic survival programs, can cause irreparable harm imposed by heartless budget cuts.

NEEDED: Budget supplement of $300 million for FY 84 which should be enacted within 60 days.

$1.47 billion in FY 85 to maintain current service levels.

A multi-year reauthorization; preferably for four years.

Maintenance of administrative funding.

Continued development and financial support of outreach programs designed to identify women, infant and children in need of food supplementation.

MCH Block Grant

Cuts in MCH: A whopping 33%

FY 85 Budget Proposal. The President has proposed a funding level of $407 million for the Maternal and Child Health (MCH) Block Grant in FY 85 and has requested that authority for the MCH Block Grant be transferred from the Health Resources and Services Administration to the Office of the Assistant Secretary for Health.

Impact on Services. Although the proposed funding level of $407 million represents a two-percent (2%) increase over the appropriation level for FY 84, it reflects a reduction of approximately fifteen percent (15%) from FY 83 after factoring in the additional money allocated to the MCH block grant from the Emergency Jobs Bill, and a twenty-five percent (25%) reduction from the FY 81 appropriation level when the MCH programs were categorically funded. These reduction estimates are conservative because they do not take into consideration the effect of inflation which has been rising at alarming rates within the health care sector.

Cuts in the MCH Block Grant have been more severe than cuts in any other health block grant. Since 1981, the cuts in authorization levels for these programs has been a whopping thirty-three percent (33%).

Untold suffering for millions of Black children

The impact of the federal budget cuts on the MCH Block Grant programs has been devastating, and any additional cuts will result in untold suffering for millions of low-income mothers and their young children. Especially vulnerable are many Black mothers, infants, and children whose health status is already in jeopardy.

- Twelve percent (12%) of all Black women under age 20 who gave birth in 1980

  received prenatal care only in their third trimester -- or not at all.

- The incidence of low-birth-weight deli-

veries is twice as high among Black infants as white.

- The Black infant mortality rate is 22 deaths per 1,000 live births compared to 11 deaths per 1,000 live births for white infants.

The vital preventive and primary health care services provided by programs covered under this grant, which emphasize improving the health status of poor mothers and children, have proven to be highly cost effective. For example, Alabama officials have estimated that their state will save between five and ten dollars on long-term, institutional care for the severely retarded for every dollar spent on maternal and child health care.

Black infants' life line cut

Despite the savings which States can realize through providing maternal and child health care, a substantial number of states have reduced services because of federal cutbacks:

- In one eighteen-month period, Michigan lost $6.2 million in federal monies to fund social services primarily targeted under the MCH Block Grant. As a result, in Detroit alone, 600 women and 11,000 children lost health care services, and many clients seeking Crippled Children's Services have been turned away. There has also been a significant reduction in services to pregnant teenagers -- who face the highest risk of health problems. At the same time, family planning clinics have lost one million dollars.

Cities close the door to patients

- New York City has suffered a continual reduction in services funded by the MCH Block Grant during the current administration. In 1980, there were eight MCH projects serving 63,747 patients. In 1982, after the President's cuts were implemented, one project closed, and the number of clients served was reduced to 59,940. Data for 1983 indicate a trend toward further reductions in services for that year.

Reductions in spending for the programs funded through the MCH Block Grant are equivalent to an increase in long-term health care costs for the government and for people least

able to pay; by eliminating or reducing preventive services, more money will be spent later for emergency care and hospitalization. Moreover, human suffering will be increased.

NEEDED: Restore MCH funds which were cut.

Increase federal appropriations to meet the needs of all persons eligible to participate in MCH programs.

Restore funding to the Title XX Family Planning Program.

EDUCATION AND HEAD START

The Simpsons believe that education is extremely important for their children. While neither of the elder Simpsons finished high school, Bradford is a man who enjoys reading, and he always has insisted that there be books in the house for their four children -- Kevin, aged four; Dehlia, aged ten, Bradford, Jr., aged sixteen; and Rachelle, aged nineteen -- who all live at home.

With the strong support of her family, Rachelle managed to finish high school despite having a daughter, Ayana, at sixteen. She wants to attend the university, but, unable to afford the tuition, has taken a part-time job at a drug store as a check-out clerk instead. Bradford, who is a talented natural artist, similarly wants to go to art school, but is uncertain that he will be able to save money from his odd jobs after school to pay for it. For Dehlia, school work has been difficult because she has a learning disability and is substantially deaf as a result of recurrent ear infections during infancy.

Both Simpsons have worried about the streets claiming their young. They have watched their neighborhood deteriorate in the years that they have lived there; on the next block, drug traffic flourishes, and the boarded-up buildings around them have become havens for prostitution. Last year, Kevin was attacked on his way home by boys who wanted his money and resented his refusal to join their local gang.

Both parents see few alternatives to their apartment building, which has fluctuating heat, littered hallways, and dark staircases, but fairly low rent. Bradford Simpson works as a custodian in a department store, and Janice is a housekeeper in a suburban community. Together, the Simpsons earn $16,000 each year, but they must feed and clothe seven people. The small amounts earned by their children have eased the family's circumstances somewhat, but both parents have encouraged their children to save as much as possible for their own futures.

Recently, Rachelle and Bradford, Jr. sought counseling from the high school guidance counselor about financial assistance for college. The guidance counselor was not encouraging, suggesting that Kevin should join the armed forces, since there are few scholarships available for art students. In Rachelle's case, the guidance counselor suggested that there were still some loans available, although the state-supported

student loan program had been curtailed because of budget problems.

The Simpsons also are concerned about Dehlia and Kevin -- Dehlia has seemed to make only minimal progress in the public school classes, and they have not found adequate child care for Kevin and Ayana while the rest of the family works in the afternoon. Rachelle is thinking about giving up her job because she sees no other way to provide care for the children. The dream of educational advancement seems to be slipping away for the Simpson children, and their parents are deeply disturbed that this is so.

Facilitating Children's Intellectual and Social Development

A child's attendance at pre-school programs and school has a great impact on him or her in a variety of ways. First, it is in these programs that many children, for the first time, participate in a large group of their peers, learning socialization skills. Second, in these early programs, children learn the precursors to academic skills -- reading, writing, and computing. A third benefit which is indirect but equally important is that these programs provide a safe environment in which mothers can leave their children while they work or attend training programs. Three federal programs which have been instrumental in making all three benefits of pre-school and school fully available for disadvantaged children are Head Start, Chapter 1, and Education for All Handicapped Children.

Program effectiveness not considered

Head Start is a comprehensive program which provides a variety of educational, health, and social services to low-income children and their families. This program gives three- to five-year-old, disadvantaged children an academic and social "head start." Of all children participating in the Head Start Program, forty-two percent (42%) are Black, and sixty-five percent (65%) live in urban areas. By participating in Head Start, Kevin and Ayana Simpson would be able to attend a quality pre-school program which could enhance their later academic achievement, and Rachelle would be able to keep her job or, possibly, go on to college. Nevertheless, while the Head Start program is available to many families and in the President's so-called "safety net," it has not escaped the President's fiscal axe.

Education: The road to freedom blocked by budget cuts

Chapter 1 (Title I) Compensatory Education Services provide remedial instruction to educationally deprived children in math and reading. This program has helped many children to do well in school when they previously were experiencing difficulties, and because parents are involved in Chapter 1 programs, the students gain the additional benefit of increased parental participation in their education. In academic year 1980-1981, five million children received Chapter 1 services; thirty-four percent (34%) of them were Black. Although the figures may seem large, most eligible children do not participate in the program. During 1981-1982 school year, only forty-five percent (45%) of the children eligible for Chapter 1 services actually received them. As with so many other social services programs, inadequate funding and decreased regulation have both been major problems.

The Education of All Handicapped Children Act (Public Law 94-142) sets forth the requirements for federally funded special education programs. Approximately four million handicapped children participate in this program. Of those children, 650,000 are Black. There was a time when children with special needs -- such as Dehlia Simpson -- were virtually neglected within this nation's public education system. The Education for All Handicapped Children Act has sought to rectify that situation. However, only half of the estimated eight million children who need special education services receive them. Any further cuts to this program would mean even fewer handicapped children receiving appropriate educational instruction, increased size of classes, and reduced staff:child ratios.

Tracing Budget Actions, FY 82 to FY 84: Education and Head Start

Shortly after the President took office, he initiated efforts to dismantle the Department of Education. This onslaught has continued throughout this administration, with cuts in programs vital to the intellectual development of this nation's children. Indeed, reviewing the plight of education programs over the past three years makes one wonder whether the Administration is pushing for a gradual return to the days when education was only available to a privileged few.

Head Start, FY 82 to FY 84

The Reagan Administration proposed a funding level of $912 million for Head Start in FY 82, and then later reduced the amount requested to $836 million for the same year. Congress ultimately approved a funding level of $912 million. The uncertainty caused by these actions led Head Start grantees to reduce hours of operation, decrease the number of weeks programs operate, increase the size of classes, and reduce staff: child ratios.

Head Start was reauthorized through FY 84 by the Head Start Act of 1981. Funds are distributed directly to the sponsoring agencies by a formula simplified in the 1981 legislation. Each State is allotted the amount it received in FY 81 and most of the remaining appropriation is distributed among AFDC recipients, Indian and migrant programs, the territories for training and technical assistance, and discretionary payments to be made by the Secretary of the Department of Health and Human Services (DHHS). The 1981 legislation also allows States to exclude the Early, Periodic Screening, Diagnosis and Treatment Program (EPSDT). In 1982, the State of Washington did just that, eliminating 1,000 children from receiving free preventive services and treatment for health problems. In FY 82 and FY 83, funding for Head Start remained the same, even in light of the unchecked acceleration in the rate of inflation.

During the 97th Congress, the Reagan Administration introduced its "Head Start Strategy Paper." Believing that the curtailments described in this paper would cause Head Start to self-destruct, NBCDI and other child care advocates bombarded the Secretary with critical comments. As a result, in April of 1982, former Secretary Schweiker issued a press release in which he reaffirmed the positive effects of Head Start.

Head Start hurt by cuts in supporting programs

The other threat, which was not so successfully thwarted, was that created by changes in or eliminations of programs supportive of Head Start. The changes in these programs amounted to a reduction in services available to low-income families participating in the Head Start program. For example, 6,000 of the CETA workers who lost their jobs would have served 50,000 Head Start children; cuts in the Child Care Food Program were equivalent to a loss of $120 million in Head Start, and as a result of

funding reductions in Title XX, the Head Start program was reduced by $12.1 million.

The Administration proposed a funding level of $974 million to serve 424,900 children in FY 84. Also requested was $76 million for nutritional programs which had been funded through the Child Care Food Program. Aware of the inadequacy of that amount to fund the various Head Start services, Congress appropriated $996 million to Head Start, not including the $76 million for nutrition programs.

Chapter 1 (Title I), FY 82 to FY 84

In the Omnibus Reconciliation Act of 1981, Title I of the Elementary and Secondary Education Act became Chapter 1 of the Education Consolidation and Improvement Act (ECIA). Chapter 1 was funded for FY 82 under a continuing resolution at $2.9 billion, down $110 million from the FY 81 figure of $3.01 billion. Chapter 1 contains provisions designed to implement the President's policies aimed at reducing spending and decreasing federal control of funds sent to States. While it retains mandates to aid the "most needy," to supplement (not supplant) existing funds, and to extend services to private school students, it withdraws many explicit requirements for administering the programs. For example, parent advocacy councils, a critical mechanism for maximum parental involvement, are allowed but not mandated.

Members of the 97th Congress demonstrated a sensitivity to the educational needs of children. By overriding the President's veto of a supplemental appropriations bill, they restored $148 million to Chapter 1. In the continuing budget resolution for FY 83, they appropriated $3.2 billion for Chapter 1, $1.3 million more than the Administration had proposed. They also vetoed the first set of regulations for Chapter 1 which would have eliminated some federal controls and exempted Chapter 1 from the oversight of existing legislation.

Congress demonstrates sensitivity to educational needs

For FY 84, the President proposed a funding level of $3.01 billion for Compensatory Education, $110 million less than its FY 82 appropriated level, despite the fact that this program has not yet achieved its goal of closing the educational gap between Black children and their peers. The appropriation finally passed by Congress was $3.48 billion.

Education of All Handicapped Children Act, FY 82 to FY 84

Consistent with his initiatives to reduce spending by a variety of strategies, the President's FY 82 and FY 83 budget proposals included the block granting of Public Law 94-142 (the Education of All Handicapped Children Act) and Public Law 98-313 (an amendment to Title I of the Elementary and Secondary School Act which provides grants for the special education of handicapped children). The new block grant was to be funded at a level below that of the original total for the two programs. Rehabilitation services and research for the handicapped were to be subjected to a similar consolidation and budget reduction. These proposals were not accepted by the Congress.

New regulations for Public Law 94-142 proposed by Secretary Bell as part of the process were subjected to a dramatic rebuff by the members of Congress and a vociferous public outcry. The Secretary announced on September 29, 1982 the withdrawal of the proposals in six areas: parental consent prior to evaluation or initial placement, the least restrictive environment, related services, timelines, attendance of evaluation personnel at Individualized Education Program (IEP) meetings, and qualifications of personnel. All of these areas, at the core of effective special education, need increased federal funding, leadership, and direction as opposed to decreased federal involvement.

Effective special education services in jeopardy

The President's FY 84 budget proposal called for basic grants to States at $998 million funding, a three percent (3%) increase. However, that increase does not:

- accommodate an estimated rate of inflation ranging from 4.6 to 7.6 percent,
- acknowledge a reduction in funding for Early Childhood Education,
- offset total reductions in Special Purpose Funds of $28.2 million,
- adjust for an outlay for FY 83 of $962 million which was below the authorized level, or
- acknowledge the reduction in funding for preschool incentive grants and the

resulting reduction in the number of pre-school children served.

Congress stands up to the President

All of these factors plus advocacy, helped to induce the members of Congress to pass an appropriation of $1.241 billion, $243 million more than the President requested.

FY 85 Budget Proposals and Predicted Impact: Education and Head Start

Over the past year or so, education has been a major focus of media attention. In addition, a slew of reports have been produced lamenting the failure of our educational system to educate our children. Nevertheless, the President has proposed additional reductions in education programs for FY 85.

Head Start

FY 85 Budget Proposal. The President has proposed a budget of $1.075 billion for Head Start, $80 million of which is to be transferred from the Department of Agriculture for nutrition programs. Without this additional $80 million, the FY 85 budget freezes Head Start funds at the FY 84 level -- $996 million.

Impact on Services. Head Start has been widely documented and accepted as an effective program. Unfortunately, Head Start is not as safe as one might suspect, even though the President has been vocal about his concern for the program and his desire to protect the children who benefit from its coordinated services. Head Start now serves approximately 430,000 children, only twenty percent (20%) of the eligible population. Of all children enrolled, forty-two percent (42%) are Black.

Is Head Start slipping through the "Safety Net"

In 1984, the increase in its appropriation resulted in insignificant dollar amounts being distributed to projects. For instance, Head Start officials in Kansas City, Missouri report that they received an additional $35,000 which barely had an impact on the city's two Head Start projects which serve 962 children of whom approximately 384 are Black. It is reasonable to expect that this trend is reflected in other projects around the country.

One project, based in Washington, is studying the various ways in which counties have

coordinated services to Head Start children in order to provide higher quality services. Advocates are pleased, so far, with legislation to re-authorize Head Start because it emphasizes parent involvement, training, and compliance with performance standards. It also provides for grantees to run projects for longer than a year. At this point, it is too early to know what the impact will be of the grants made as a result of the new expansion program.

Head Start support system continues to erode

Finally, this multidisciplinary support system is provided at a critical stage in the development of young children. It makes services available to children from low-income families who would otherwise not receive them. The Administration's verbalized concern for Head Start and the children it serves is questionable in light of the persistent reductions in the form of "freezes" and its bites at other programs which are part of the support system, such as Medicaid, child nutrition programs, and other social services.

Head Start providers are opposed to a move to require them to administer the food programs. They predict that such a move will divert energy and man hours at the expense of services to children. The National Black Child Development Institute, along with other child advocates, has been instrumental in pushing back this move each time it has been proposed.

Chapter 1 (Title I)

FY 85 Budget Proposal. The President has proposed a budget of $3.48 billion for Chapter 1. In addition, he has recommended that proposed funds be redistributed in order to allow more dollars for grants to local education agencies.

Administration jabs at Chapter 1

The President continues to support the introduction of legislation providing for a voucher system to be used at the local level by parents whose children are eligible for Chapter 1 services. The President also continues to support tuition tax credits to parents who send their children to private schools.

Impact on Services. There are some stark realities to be considered in this context.

- Approximately ninety-five percent (95%) of Black children in grades 1 through 6 are in public schools.
- Black student enrollment will continue

to increase in urban areas already strapped for dollars.

- Thirty-four percent (34%) of the children receiving Chapter 1 services are Black.

- Less than half (47%) of the 11 million children eligible for Chapter 1 are being served.

The Administration has consistently jabbed at Chapter 1. No consideration has been given to the erosion of the value of the dollar in the President's budget requests. For instance, in FY 83, the actual appropriation for Part A Basic Grants to local districts was $2.413 billion. If this figure is adjusted for inflation, the actual dollar value is $917 million (using 1970 as a base year) -- not even one billion dollars. Obviously, it is impossible to sustain the proven effectiveness of Chapter 1 with continued reductions as requested by the President.

Ploys obscure reality

There will not be an increase of dollars flowing into the States. The Administration's proposal to redistribute grant funds so that local education agencies receive a larger share of the dollars is a typical ploy which obscures the reality. Actually, the budgets for Migrant Education and State Administration are cut and the money transferred to local districts. The stage is set for in-fighting and disunity among targeted recipients of the same dollars. Such a move builds in excuses for limited accountability activities by the States.

Officials in Richmond, Virginia, report that their Department of Education has a smooth working relationship with the state legislature. Unfortunately, that good will has not resulted in the state's filling the gap left by decreases in funding to Chapter 1. Consequently, there is no longer a summer remedial program in Richmond. Already, $60,000 of the state's allotment is syphoned off for private schools which have sought assistance in growing numbers since this Administration's emphasis on the increased services to private schools.

Chapter 1 program was conceived in response to a national policy designed to erase inequities which relegate Black families to permanent poverty. Its success has been widely documented and publicized. Coordinated advocacy efforts have proven powerful restraints to thoughtless and insensitive initiatives. The Administration

Coordinated advocacy: A proven restraint

must be advised of the continued threat that its proposals pose to the likelihood that the conditions sought to be reversed will be maintained or recreated.

NEEDED: $350 million to extend services to an additional one million children.

Careful monitoring of the implementation of Technical Amendments passed in 1983.

Adoption of appropriate Effective Schools Design criteria, using the five criteria identified by the late Professor Ronald Edmonds.

Rejection of reductions in Migrant Education Programs and State Administration Funds.

Rejection of proposals for a voucher plan.

Education for All Handicapped Children Act

FY 85 Budget Proposal. In his current budget proposal, the President has requested $1.07 billion for special education. This request includes six million dollars to implement a transitional program proposed for FY 84. The program is designed to assist handicapped students in moving smoothly from school to work or further education.

Program manipulations rather than program increases

When the six million dollars for transitional programs is subtracted from the total funding request, it is clear that there is no significant increase in funding for special education services. The small increase does not reflect the rate of inflation. Preschool incentive grants are due for a reduction, as are deaf-blind centers, innovation and development projects and special education personnel development.

Impact on Services. Currently, four million children are participating in state and local special education programs that qualify for federal assistance. Approximately 625,000 (16%) of these students are Black, but forty percent (40%) of the children assigned to classes for the Educable Mentally Retarded (EMR) are Black.

The proposed redistribution of funds within the grant benefits one group of students at the expense of another and undermines school districts' efforts to meet the needs of their handicapped children.

Over-representation of Black children in EMR classes

Of particular note is the proposed reduction of funds for staff development. In light of the fact that the current staff does not seem to be able to reduce the over-representation of Black children in classes for the educable mentally retarded, it does not seem prudent to cut this budget. Instead, more, not less, needs to be spent in this area. Innovative approaches must be taken to develop staff with skills to identify, appropriately diagnose, and treat the special needs of students so that Black children will not be given the labels of an implied permanent disability (such as "mental retardation") as opposed to the label of "learning disabled" which implies a defect which can be corrected. The Southeastern Public Education Program, Inc. reports an increased concern and monitoring by Black parents of the implementation of the law and the misclassification of Black children. In Georgia, litigation is pending on the issue of testing and placement in special education programs.

The Fall 1982 Elementary and Secondary School Survey conducted by the Department of Education, Office of Civil Rights, reveals that Georgia is not the only state where the implementation of special education legislation raises eyebrows. In North Carolina sixty percent (60%) of the students in EMR classes are Black. In South Carolina, seventy-five percent (75%) of the students in EMR classes are Black, while Black students, incidentally, represent forty-one percent (41%) of the total school population.

The tragedy: Denial of pre-school services to handicapped children

P.L. 94-142 pre-school incentive programs have consistently been a target of the current administration. FY 85 proposals to cut the programs further flies in the face of authoritative findings that there are sustaining positive effects which accrue to children who participate in preschool programs What a tragedy it is to deny handicapped three or four-year-olds this opportunity.

NEEDED: Retain adequate funds for staff development.

Review the delivery of services to deaf and blind children, identifying services to Black children to study

the impact of dollar reductions.

Continue to resist any regulatory reform which will impede effective implementation of the law.

Fund parent organization and training.

Extend eligibility for transition services to students who have been misclassified in special education programs and now need proper educational services.

Retain Head Start under the adminstration of the Administration for Children, Youth, and Families.

Allow projects to provide more than one year of service.

Do not transfer Child Care Food Program funds to Head Start.

Assess impact of grants made under the expansion program.

"I would work if I could, but I don't have skills for jobs that pay. Lord knows I've tried to find work, did work for a long time, but when the twins' father left us two years ago, when they were just under a year old, I gave up. You wouldn't believe how they treat you at the welfare offices -- prying and shuffling you from one place to another. I even signed up for a job training program, but it was cancelled before I could start. I guess it made no difference anyway. My nephew, George, who is ten, lives with me. His mother and father both died in a fire. If I was in the training program, who would take care of my nephew and the twins? The woman down the hall who used to let the children stay in her apartment moved away, and the child care center is too crowded and too expensive.

"You know, welfare benefits are only $300 for all of us. My oldest child, Samuel, is getting out of high school this year. He's a good boy, and he doesn't give me much trouble. He wants to go to technical school and study computers, but I won't be able to help him. Truth is, I lose benefits for him when he turns 18 in July. They tell me it didn't used to be that way if he was in school full time. Things sure have changed for the worst."

Bertha Patterson sat at the small kitchen table and chain-smoked one cigarette after another. The aura of defeat and fear hung over the room like the smoke from her omnipresent cigarette. Nervously drumming her fingers on the table, she began to speak again in a halting voice.

"Look at this place," she said. "Just look around you, and ask yourself why anybody would stay if they could do better. We tried for public housing, you know. There are two thousand families ahead of us. The woman who talked to me about it guessed that we might get in in five years, if they can build some more. Meantime I'm paying $105 a month for this dump, where the windows are broke and the plumbing leaks all the time. In the winter when it's cold, we turn on the stove and live in the kitchen. Thank God, I don't pay the gas bill, but once the landlord didn't pay it either, and it was a mess. Then there was the neighbor upstairs whose toilet overflowed. You can see the hole in the ceiling yourself.

"I'm proud, but not so proud that I won't stand in those lines for the cheese and butter.

Our church gives clothes away, too, and I've stood in those lines. Once, I stood in line with hundreds of others for a job in a new bakery on the outskirts of town. But, by the time I added the cost of taking the bus, and the uniforms, and child care for the twins, and lunch at work, there was so little left. When I asked the social worker whether I could earn this $75.00 a week after expenses, she said that it would be counted against my benefits. I may not have the highest degree, but I'm not stupid. If, by working, I lose everything, it's not worth it. So here I sit and worry. There doesn't seem to be much point. . . ."

She lit another cigarette and stared into space. The silence was deafening.

Promoting a Secure and Healthy Home Life for Children

For a family to function well, certain basic needs -- food, shelter, clothing -- must be met. Unless these needs are met, one cannot hope to tackle the more difficult problems facing many families in the 1980's. Because the Federal government recognizes some responsibility for promoting the well-being of American citizens, it has instituted social services programs which attempt to fulfill these basic needs for families living in poverty.

The Aid to Families with Dependent Children (AFDC)program is a major economic support for low-income families with children. Of all AFDC recipients, seventy percent (70%) or 7.6 million are children. In 1979, forty-four percent (44%) of families participating in AFDC were Black. While AFDC is primarily a cash assistance program, it has also provided work incentives for participating parents. Thus, a single mother like Bertha Patterson who qualified for benefits could work or attend a job training program, and AFDC would pay for child care. However, as Ms. Patterson sadly discovered, lack of funds and counterproductive regulations have made it financially more beneficial for some parents to remain out of the work force, and incentives for participating children to go on to college have been virtually eliminated.

Child care services needed by Black families

Child care services are much needed by Black families. Currently, sixty-seven percent (67%) of married, working Black mothers, and sixty percent (60%) of single, working Black

Few spaces, expensive fees

mothers with children under five need out-of-home child care services. Forty-eight percent (48%) of all Black families are headed by women. Title XX Child Care Services have played an important role in meeting the child care needs of Black families. Black children comprise forty-four percent (44%) of the children enrolled in non-profit child care centers receiving federal funds. Regrettably, there are still many families which do not have adequate child care provisions. Like the center in Bertha Patterson's neighborhood, many child care centers, without federal assistance, are unable to meet fully the needs of their communities because of too few spaces or too expensive fees. This leaves parents with few alternatives; they can either leave their children in unsafe care -- or with no care at all -- or withdraw from the work force.

The Child Welfare Programs provide foster care and adoption services to children whose families are unable to care for them. Child welfare services, when properly provided, can literally find temporary or permanent homes for homeless children. Thus, Bertha's orphaned nephew, George, could have received a foster or adoptive placement through the child welfare program. However, this program desperately needs federal support to help it meet the special needs of Black children, in particular. Of the 300,000 children receiving out-of-home care, 100,000 are Black. There are currently between 30,000 and 50,000 Black children eligible for and awaiting adoption. In major cities, a growing percentage of the foster care population is Black. Federal efforts to help solve the problem of over-representation of Black children in the child welfare system have been inadequate.

Tracing Budget Actions, FY 82 to FY 84
Family Supports

Actions speak louder than words

While the current administration pays lip service to holding strong family life as a priority, its actions indicate otherwise. The President has repeatedly attempted to curtail programs which provide services to families that help to keep them strong and unified. Over the past three years, the Administration has done little to promote -- and much to undermine -- essential family support programs.

AFDC, FY 82 to FY 84

In FY 82, the Reagan Administration proposed

and Congress enacted a massive cut in AFDC benefits which was projected to "save" $1.02 billion or fifteen percent (15%). The cost-saving proposals which were enacted included phasing out work incentives, capping work-related expenses such as child care, restricting eligibility for AFDC to families with gross incomes at or below one hundred and fifty percent (150%) of a state's standard of need (which, in many cases, has not changed since 1960), and including the income of stepparents in calculating eligibility and benefit levels, even though most states do not hold stepparents legally liable for such financial support. Thus, in FY 82, approximately 660,000 families had their AFDC benefits reduced or eliminated, and many of the individuals who lost AFDC benefits automatically lost Medicaid coverage as well. In addition, coverage for women pregnant for the first time was reduced, and working AFDC recipients lost assurances of quality child care.

Massive cuts persistently proposed

The Administration's FY 83 budget proposed to take a step further the AFDC philosophy advanced by the Omnibus Budget Reconciliation Act. In response to the budget resolution for FY 83, the Senate Finance Committee's recommendations were extended in the Tax Equity and Fiscal Responsibility Act of 1982 (Public Law 97-248). The major provisions of that legislation include: rounding off eligibility and benefit amounts, prorating the first month's benefits, eliminating uniformed service as the basis for AFDC eligibility, providing optional job search provisions, enabling States to prorate shelter and utility costs when recipients live with other persons, and reducing the error rate match.

Strengths of Black families undermined

In FY 84 President hoped to accomplish a reduction of $750 million by introducing program proposals to:

- mandate work for all recipients regardless of the availability of quality child care,
- include all related adults and children in the AFDC assistance unit (except SSI recipients) regardless of actual contribution of household income,
- terminate parent benefits when the youngest child reaches age 16 despite an unemployment rate of approximately fifty percent (50%) among Black teenagers.

These policies would have decreased or eliminated benefits for many families. Fortunately, Congress was able to defeat these efforts.

Title XX Child Care, FY 82 to FY 84

The legislation of 1981 created a new social services block grant to replace the prior federal state matching program which required that States match every three federal dollars with one dollar. Funding was reduced from $3.1 to $2.4 billion.

The new block grant legislation not only left States with the broad discretion to decide which services would be provided with their Title XX funds, but also eliminated other protections including:

- a fifty percent (50%) target of funds for welfare and other low-income families,
- incentives for day care and family planning services, and
- State accountability for expended federal funds through the submission of a comprehensive annual State service plan.

The FY 82 budget authority for Title XX was $2.4 billion, a cut of $600 million from the previous year. When the Title XX program was changed to the Social Services Block Grant, a $200 million earmark for child care was eliminated. Withdrawal of the $200 million earmark contributed to a signficant reduction of funds available to the States for child care. In FY 83, the Title XX program was funded at $2.5 billion. This represented a $100 million increase in the funding source for all social services.

For FY 84, the President proposed a budget authority of $2.5 billion for Title XX. He further recommended the elimination of the Community Services Block Grant and that States use Title XX monies to fund services previously funded by the Community Services Block Grant. Congress resisted the efforts of the Administration to eliminate the Community Services Block Grant and authorized maximum funding for Title XX at $2.7 billion. The current FY 84 appropriation is $2.675 billion. It is expected that the additional $25 million will be appropriated later this year.

Congress resists budget axe

Child Welfare, FY 82 to FY 84

President Reagan proposed repealing the Child Abuse Prevention Act and the Adoption Assistance Act of 1981, to include their service providing components in a Social Services Block Grant, minus provisions for homeless or abused children. Congress rejected this proposal, but reduced funding for Child Abuse Prevention and Child Welfare Services. Funding for Child Abuse Prevention went from $23 million in FY 81 to $17 million in FY 82, and Child Welfare Services and Training went from $163.6 million in 1981 to $156.3 million in FY 82.

In the FY 83 budget, the Administration proposed consolidating the federal child welfare programs, cutting their total FY 82 funding by eighteen percent (18%), and distributing these funds to States for Child Welfare Services and Training. The FY 83 funding level for these programs under the continuing resolution was $572.6 million.

The President's FY 84 proposals included eliminating the Child Welfare Training Program for schools of social work, and freezing Child Welfare Services. In addition, the President requested $440.2 million for Foster Care Services -- a $45 million increase over FY 83, and $5 million for Adoption Assistance. The irony of this proposal is that it allocated a greater increase in funds to keep children in temporary placements than to find permanent adoptive homes. Furthermore, the Administration delayed implementation of the Adoption Assistance Act which also provides for prevention and family reunification services. The Congress ultimately approved funding level of $626 million for Child Welfare Programs, including $169 million for Child Welfare Services and Training.

Social Services are critical to keeping families intact.

FY 85 Budget Proposals and Predicted Impact: Family Supports

The President has continued his harsh onslaught against family support programs. His FY 85 budget proposals would only further decrease the ability of these important programs to help families stay together.

Aid to Families with Dependent Children

FY 85 Budget Proposal. Each year since

Harsh onslaught against family support programs continues

FY 81, the AFDC program has been the primary target of budget cutting strategem. This program has in fact been vilified by the Reagan Administration as one of those social programs with an over-abundance of ill-intentioned people looking for a "free ride" on public funds from "tax paying, hard working, middle-America". Despite the fact that the majority of AFDC recipients are children and national survey data indicate that if given the opportunity, welfare recipients would prefer to work and become economically self-sufficient, this program which offers minimal economic support at best, is slated for a further reduction of $633 million in FY 85. To accomplish this savings in budget authority, the Reagan Administration has reintroduced proposals which were submitted last year but rebuffed by Congress. These proposals are contained in policy directives designed to:

1) Mandate Community Work Experience Programs which are designed to ensure that all adult recipients register to participate and actually participate in work to offset public welfare expenditures.

The Black extended family in danger of extinction

2) Include non-related parents and siblings living in a household when formulating the AFDC assistance grant. States must consider non-related members of a household unit in calculating the benefits for a child applying for or receiving AFDC.

3) Prorate shelter and utility costs when families live in households with multiple family inhabitants.

4) Terminate the benefits of parent or caretaker when the youngest child reaches age 16.

Impact on Services. Close to one fifth of all Blacks, including about one third of all Black children, are enrolled in the AFDC program at any given time. In 1981, approximately 11.2 million people were on the AFDC rolls, receiving average monthly payments of $96. In the summer of 1983, even though unemployment had risen sharply, the Congressional Budget Office estimated that there were 10.6 million people receiving average payments of $105 monthly.

The economic picture remains bleak

Average payments rose because President Reagan's AFDC cuts were targeted toward the

working poor. Family members with part-time jobs which offset the welfare supplement and fostered some sense of economic independence were eliminated from the rolls. Other budget cuts proposed by the Reagan Administration were targeted toward:

- the extended family structure,
- the step-parent family or "blended family structure," and
- families with unemployed teenagers present in the household.

No state has been immune to the recent recession's blows. The recession has reduced state revenue collection while at the same time, increased the demand for services. Mid-western states have probably been the hardest hit, and the demand for economic support to families has been great. In Ohio for example, 2,116 families were removed from the AFDC caseload after the first round of budget cuts in 1981. This represented over 4,000 children who were then left with no medical assistance.

Ohio has a General Relief Program (GR) for income-eligible, non-AFDC families and individuals. What state welfare administrators have witnessed is a marked increase in the GR program, composed primarily of teenagers with no job skills or job opportunities, and former AFDC recipients who lost their benefits due to changes in the work incentive program or the presence of a step-parent. The GR program is funded only by state and county funds and is draining state revenues. With the proposed elimination of the WIN Program in FY 85 (which offers job training to help AFDC mothers find jobs and leave the welfare rolls), growing unemployment among some population segments, and inadequate job programs, states like Ohio will be unable to meet the growing demands from the poor for services and economic support.

Given a choice - Black families do not prefer public assistance

No family, if given a choice, wants to live on AFDC or other types of public assistance. The economic picture in the Black community today is so bleak that public assistance programs offer many families the only opportunity for survival. More than thirty percent (30%) of all Blacks live below the poverty level; fifty percent (50%) of all Black children live in poverty; and Black unemployment (18%) is more than double the rate among whites. Teenagers cannot be included in a family's AFDC grant after age 18,

and one out of every two Black teenagers is unemployed compared to one out of every six white teenagers.

Who are the structurally unemployed?

Steady, long-term economic growth has often been prescribed as a reliable but certainly not a complete cure for the high unemployment of the 1980's. However, labor-market problems generated by fading industries, the transition to newly-established industries, and -- most importantly -- the ingrained segments of the structurally unemployed labor force, will not disappear automatically as the economy recovers. Who are the structurally unemployed? Blacks and other minorities; single, female heads of households; and teenagers.

NEEDED: A National policy to address the growing rate of poverty in this country. Specifically AFDC policy changes should:

Mandate a minimum AFDC benefit level, and encourage States to maintain AFDC benefit levels,

Restore the work incentives and encourage supported work,

Ease asset restrictions,

Insure that all potentially eligible families and children are aware of eligibility rules for AFDC, and

Mandate Medicaid coverage for first-time pregnant women.

The aforementioned provisions are contained in the Omnibus Anti-Poverty Act of 1984, H.R. 4920, introduced by Representatives Charles Rangel (D-NY), Harold Ford (D-TN), and Henry Waxman (D-CA).

Title XX Child Care

FY 85 Budget Proposal. The Administration has asked that the Social Services Block Grant (Title XX) be funded at $2.7 billion in FY 85. This is a $25 million increase in the appropriations over FY 84. However, it represents no real increase at all because Congress intended the funding for FY 84 to be $2.7 billion, a $200 million increase in budget authority over FY 83.

The illusion: An increase for Title XX

The authorization for the Social Services Block Grant was increased by $200 million with the

legislation to extend the Federal Supplemental would put funding in FY 84 at $2.7 billion and in FY 85 at $2.7 billion. However, the appropriation bill which passed for FY 84 contained only $2.675 billion or $25 million less than the amount authorized for that program.

This means that the Administration is able to say it is requesting a $25 million increase for FY 85 when, in fact, Congress had authorized this amount which is expected to be applied during this current funding period through a supplemental appropriation bill.

Impact on Services. The Title XX Social Services Block Grant continues to be the core funding source for a variety of social services including child welfare, homemaker, child protection, and child care services. In the area of child care alone, this program is the largest direct source of federal funds to the States for services. We know too that the demand for child care is growing steadily as sixty percent (60%) of children six years and younger have mothers who participate in the paid labor force. According to the Current Population Survey (June 1982) by the Bureau of the Census, almost half (46%) of the non-married female population not in the paid labor force with pre-school-aged children would work if child care were available at a reasonable cost.

The importance of the Social Services Block Grant, which provides child care services -- an essential economic support to all families but particularly significant for low-income and single-parent families -- is indisputable. Nevertheless, this program was cut by eight percent (8%) in non-inflationary dollars between 1981 and 1984. However, when inflation is considered, the Social Services Block Grant was reduced by over twenty-one percent (21%) during the same period. Before Title XX was cut and converted into this Social Services Block Grant in 1981, the spending level of the program in FY 85 would have been $3.3. billion.

Title XX-Day Care: A critical need for our families

Why is this so critical to the Black community?

- Title XX is used to subsidize child-care slots, particularly in center-based child care settings. National survey data indicate that if given a choice, Black families prefer center-based child care arrangements when they can afford them.

- Forty-six percent (46%) of the children in non-profit, center-based child care settings are Black.

- Seventy percent (70%) of the Black families living in poverty are headed by single females. Close to fifty percent (50%) of the non-married women who do not work would work if child care were available.

- One in every two Black children lives in poverty. The number of children under age six living in poverty is expected to increase by roughly one million during this decade. A majority (75%) of these children will live in single-parent families headed by females.

Quality child care: A dream deferred

Many low-income families -- Black families -- will have difficulty obtaining quality child care for their children without direct financial assistance. The costs of all child care arrangements are increasing, particularly for infants and school-aged children. Increased Title XX monies are essential to providing economic support to families and promoting self-sufficiency. Other sources of funding for child care are important, including indirect funding such as the Dependent Care Tax Credit. However, very few low-income families benefit from tax credits.

NEEDED: $300 million increase in funding authorization for the Social Services Block Grant in FY 85. This would put the funding level at the 1981 spending target prior to the budget cuts.

Child Welfare Services

FY 85 Budget Proposal. The most poignant feature of the President's FY 85 budget request for Child Welfare Programs is the absence of any spending increase for Child Welfare Services and Training. The budget request for Child Welfare Services and Training is $169 million, the same amount authorized in FY 84. The proposed amendment would eliminate the categorical training program that provides funds to schools of higher learning. The Department of Health and Human Services is aware of increased state expenditures due to a substantial growth in the number of children who need to be served by child welfare programs. However, budget increases are requested for the Foster Care Maintenance Program ($460

million for FY 85, an increase of $20 million); Compensation Program (Public Law 98-135). This and the Adoption Assistance Program ($13 million for FY 85, an increase of $8 million).

Impact on Services. According to the Bureau of the Census, there are approximately 80 million children in 33 million families across the country. At any given time, two million children and their families depend on public child welfare agencies for in-home or foster care services. A recent study by the Office of the Inspector General, Department of Health and Human Services, revealed several interesting trends in both the cost and count of children eligible for Title IV-E Foster Care (P.L. 96-272, the Adoption Assistance and Child Welfare Act of 1980) as well as for all children in foster care. This study was based on case studies of ten states.

The foster care cost and count trends revealed:

- costs are up twenty-six percent (26%) for all foster care children and up eighteen percent (18%) for federally funded foster care children, and
- counts are down five percent (5%) for all foster care children and down three percent (3%) for federally funded foster care.

The demand for child protection services increases

Increased costs in four states were attributed to the effects of a depressed economy, an increase in the demand for child protection services, and an increase in the number of families eligible for AFDC. All of the states reported an increase in program costs attributed to inflation and changes in the demographic makeup of the children in the foster care system. Children now in the foster care system include:

- older children, specifically older Black children;
- children in need of specialized care (i.e. physically and emotionally handicapped); and
- children from the juvenile justice system (In many cases, courts are using family foster care placements in lieu of detention centers for "juvenile delinquents and juveniles in need of supervision").

The increased cost of foster care is a

national phenomenon. While we are pleased that the Reagan Administration recognizes this fact, well, we do not feel that a $20 million increase for foster care through the Title IV-E program without an increase in Child Welfare Services monies can adequately meet the cost of care. The increased budget request for Title IV-E may offer needed assistance to the States in meeting increased program costs provided the number of children eligible for care through the Title IV-E grant-in-aid program does not increase.

Black children: Too many in out-of-home care.

Currently, states participating in the Title IV-E Program are eligible to share in any funds appropriated for Child Welfare Services which exceed $141 million and to transfer unused funds from their Foster Care allottment (Title IV-E) to Child Welfare Services. This provision must be reauthorized by October 1, 1984, or States will no longer have this option. At the same time however, some states are implementing aggressive permanency planning case review systems for which support services are critical.

Therefore, if the States are to be successful in their efforts to reduce or eliminate the need for foster care, Child Welfare Services must be funded at a level which can offer more support to the States. A separate line item for training money is also essential to train child welfare workers. This is particularly important as it currently relates to changes in AFDC eligibility criteria to enable workers to protect the civil rights of children and their families eligible for Foster Care and Child Welfare Services.

NEEDED: $200 million for Child Welfare Services and Training in FY 85.

$460 million for Foster Care (Title IV-E)

$13 million for the Adoption Assistance Program.

Reauthorize the authority for States to: 1) Use a portion of the Federal foster care matching funds made available under the federal ceiling which are not used for foster care maintenance as IV-B child welfare services, and 2) In years when the IV-B child welfare services appropriation is insufficient to trigger a mandatory foster care ceiling to gain the option to use foster care funds for child welfare services (expires September 30, 1984).

PUBLIC POLICY EDUCATION:

What You Can Do

The information in this document has shown the potential impact of the proposed FY 85 budget on human service programs in the areas of health, education, and welfare. As in previous years under the Reagan Administration, Black children and their families will suffer further if vital services and programs are cut and/or altered. The National Black Child Development Institute urges all concerned and caring people to help protect these programs by becoming actively involved. There are a variety of different avenues you can take as an individual -- or as part of a group -- to influence public policy. These include developing telephone strategies, writing letters to congressional representatives, taking budget surveys, and involving your community in activities designed to educate and prepare your friends and co-workers for action.

Develop Telephone Strategies

Valuable initial contacts made through the telephone

If used correctly, the telephone can be an effective instrument through which you can influence public policy. Valuable initial contacts with appropriate local, state, and federal officials and their staff can be obtained quickly through the telephone, and immediate feedback can be received. Unless you have an established personal or professional relationship with the public official, your phone call may not be personally answered. Your call will be screened first, then handled by the appropriate staff member, often the administrative assistant or public liaison.

In order to ensure a response to your calls, there are several "rules of thumb" that should be followed:

1. Before dialing. Carefully plan your call. Know exactly why you are calling (e.g. to receive or give information, to ask general or specific questions about programs and proposed budget cuts) and what you hope to accomplish by the call. Haphazard calls will probably be promptly rejected by the officials' screening staff. It is often helpful to write down the main points you want to make in your conversation, so you will not stumble over your words.

2. During your call. Immediately identify yourself (and group) and the nature of your call. At all times, be polite and courteous. Use correct English, and avoid informal slang. Speak clearly, slowly, and at an appropriate level. Do not shout or whisper.

3. After your call. Determine the effectiveness of your call. Were your goals for the call met? Did you talk to the appropriate staff member and receive or give the information you wanted? Do you need to make a follow-up call or contact a different public official?

Telephone numbers for federal, state, and local officials should be readily accessible through directory assistance or phone directories. Directories can be obtained from the clerk of the House, and the Secretary of the Senate. In addition, local government offices can be helpful in providing numbers for state and local officials. Finally, if you wish to make inquiries or comments about presidential policies, you can call the White House at 1-202-456-7639.

Write A Letter

Letters can influence legislators' decisions

Letter writing is another simple and effective method by which an individual can influence public policy. If you are concerned about President Reagan's budget cuts and their effect on Black children -- WRITE A LETTER to your representatives in the United States Congress as well as state and local officials.

Each member of Congress must vote in support of or opposition to the President's proposed levels of funding for the various federal programs. Therefore, any information or point of view you express in a letter can directly affect his/her decision.

Type of Letter

You can write either a general letter of concern or a more specific one relevant to a particular issue pertinent to a federal program. In both cases, it is advisable that your letter be courteous and sincere. Avoid direct criticism whenever possible. Letters that are constructive in tone will receive a much more positive reading. Keep your letter brief, and if it is a specific one, discuss only one issue.

The shorter and more pertinent the letter, the greater the impact. It is also most effective to handwrite your letter because this adds a personal touch.

If you write a specific letter be sure that you are informed before writing and have your facts and arguments correct. Exaggeration, rudeness, threats, or emotionalism may only cause the reader to ignore the letter.

Contents of Letter

There is no particular format that must be followed when writing letters to your representatives. As a rule, however, four main pieces of information should be included. Identify:

- who you are,
- why you are concerned,
- what you are concerned about, and
- the action to be taken (support or reject the budget proposals).

In a specific letter, also be sure to clearly identify the issue or specific federal program you are addressing. Here, when you document your facts or arguments, it is usually most effective to cite either personal, first-hand knowledge and experience or local aspects of the issue. There is no set order for presentation of this information.

When composing letters, several conventions should be employed. Use the following guide for letters to congressmen/women and senators:

The Honorable (name)
Legislative Body
State Capitol (when appropriate)
City, State and Zip Code

Two examples are given below:

The Honorable John Doe
United States Senate
Washington, D.C. 20510

The Honorable Richard Roe
Illinois General Assembly
State Capital
Springfield, IL 62706

Finally, the salutation and conclusions

should be written as follows:

Dear Senator (last name),
Dear Representative (last name),
Dear Assemblyman (last name),

Sincerely yours,

(Your full name)

Sample
General Letter

The Honorable (name)
Legislative Body
City, State and Zip Code

Dear Senator/Congressman (name):

I live in your state/district, and I am very concerned about the effect of the Reagan Administration's proposed federal budget on poor people, many of whom are Black. His plan to increase funding for the military and decrease spending on social service programs is very disturbing.

Most of the federal programs targeted for budget cuts directly effect the health, education and general welfare of poor families, especially their children. AFDC (Aid to Families with Dependent Children), WIN (Work Incentive Program), WIC (Special Supplemental Food For Women, Infants, and Children), Child Nutrition Programs, Medicaid and affirmative action programs are examples of some of the programs that may be cut.*

I urge you Senator/Congressman not to support President Reagan in his efforts to cut these programs.

Sincerely yours,

(Your name)

Skeleton

Paragraph 1: Who you are, what you are concerned about.

Paragraph 2: Why you are concerned.

Paragraph 3: Action to be taken.

*If you are not sure which specific programs may be cut, do not include them in the letter.

Sample
Day Care Issue

The Honorable (name)
House of Representatives
Washington, D.C. 20515

Dear Congressman (name),

I am a former recipient of public assistance who is presently employed full-time. I am also a single mother with four children, two of whom are preschoolers. The reason I have been able to maintain my job is because of our neighborhood day care center, which provides excellent care for my children at an affordable cost.

At a recent parent's meeting, we were told by the director of the center that the center might close next year because it is not certain whether our state would provide enough Title XX money for it to be continued. Without this center, I will probably have to leave my job to care for my children properly.

I wish to remain economically independent and do not want to return to the welfare rolls. In a recent newspaper column in the press, you stated the necessity for people like myself to break away from the welfare system in order to improve our quality of life. I have broken away from the system but need the services provided by the center to maintain my independence. Many other working mothers in my community are in the same situation.

Because I live in your district, I urge you to support Title XX increases.

Sincerely yours,

(Your name)

Skeleton

Paragraph 1: Who you are, personal facts.

Paragraph 2: What program concerns you.

Paragraph 3: Why you are concerned.

Paragraph 4: Action to be taken

Sample
Child Welfare Issue

The Honorable (name)
U.S. House of Representatives
Washington, D.C. 20515

Dear Congresswoman (name),

I urge you to oppose President Reagan's plan to keep the funding for supportive child welfare services at their present levels.

I am a widow who recently became physically disabled. In order to care properly for my three children, I needed someone to help me in the home with routine tasks such as grocery shopping, cleaning, and cooking. With little extra money and no other family members in the area to help, I applied to our local child welfare department for a "mother's helper." They said they were sorry, but they could not help me because there was not enough money in their budget to hire more mother's helpers -- the present ones already had too many clients and could not give me the time that I needed.

Because this homemaker service was not available to me, I had to put my children in foster care. In less than a year, two of my children have been in four different foster homes, and my oldest child has developed behavioral problems and is in an institution. I love my children -- and we all want to live together as a family.

Please help us and other families like us in your district by voting for increased funding to the child welfare services which provide homemaking and other important services.

Sincerely yours,

(Your name)

Skeleton

Paragraph 1: Action to be taken, identification of program(s).

Paragraph 2: Who you are, personal facts, what you are concerned about, why you are concerned.

Paragraph 3: Personal facts.

Paragraph 4: Action to be taken.

Sample
Education Issue

The Honorable (name)
United States Senate
Washington, D.C. 20510

Dear Senator (name),

Ever since President Reagan took office, he has been threatening to cut and/or reorganize federally funded education programs. He has even tried to eliminate the Department of Education.

I am a fifth grade teacher in your state, in the city of _____. Over the years, federal compensatory education programs now administered under Chapter 1 of the Education Consolidation Act have helped thousands of educationally disadvantaged children improve their academic skills. Many of the individual programs have also involved the parents in the educational process, and thus have given them hope that their children can move out of the cycle of poverty.

Every child in this country should have the opportunity to excel educationally through access to a quality education. Providing equal educational opportunities for all children does not seem to be one of President Reagan's highest priorities. As an educator, I urge you, Senator, to oppose any efforts by President Reagan or other members of Congress to reduce the funding of educational programs or lessen the federal involvement in basic educational services, especially those designed to meet the special needs of educationally deprived children.

Sincerely yours,

(Your name)

Skeleton

Paragraph 1: What you are concerned about.

Paragraph 2: Who you are, facts, identification of program(s).

Paragraph 3: Why you are concerned, action to to be taken.

Conduct a Budget Survey

One of the most persuasive ways to influence policy makers is to provide relevant data pertaining to the issue of concern. The allocation of government funds for specific programs should be based on whether the services within the programs are needed and whether they are being utilized by the appropriate target populations. Survey local human service programs to discover the effect of the budget cuts on the populations they serve. Actual numbers and statistics from specific service programs provide the necessary information for legislators to make reasonable judgements as to their support or opposition to proposed levels of funding. Two sample surveys are included in this section; one focuses on child care programs and the other on child welfare programs.

Sample I
Child Care Impact Survey

Please respond to each question in the space provided. If additional space is needed, please use the back of the questionnaire.

1. Please identify your state and county or local jurisdiction. _____

2. As of October 1981, how many children received subsidized child care in your county or local jurisdiction? _____

3. Currently, how many children receive subsidized child care in your local jurisdiction? _____

4. What is your estimate of the number of child care programs which have closed in your county/local jurisdication? _____

5. For fiscal years 1981, 1982, and 1983, how much money was expended for child care in your local jurisdiction?

   FY 81 _____ FY 82 _____ FY 83 _____

6. For FY 84, how much money has been allocated for child care?

7. Has funding for child care income eligibles been affected by the budget cutbacks and the Budget Reconciliation Act of 1981?

   Yes _____ No _____

8. If yes, what has been the effects? _____

_____

_____

_____

9. If yes, what has been the number? _____

10. As of October 1981, how many working AFDC families have claimed child care expenses as part of their income-disregard computations? _____

11. How many families were dropped from the AFDC roles following the implementation of the new regulations for utilizing income disregards? _____

12. Have there been any changes in the way your state funds child care for AFDC clients as a result of changes in the federal budget and program eligibility standards since 1981? _____

_____

_____

_____

13. Prior to the changes in the use of income disregards for AFDC recipients, was there a cap (or ceiling) on the child care deduction?
Yes _____ No _____

14. If yes, what was the amount per child? _____

_____

15. Were there adjustments made for more than one child?
Yes _____ No _____

16. If yes, what were they? _____

_____

_____

_____

17. What plans for the future does your county (or state) have for utilizing IV-A disregards and Social Services Block Grant funds for child care for AFDC mothers? _____

_____

_____

_____

18. Have you observed changes in the need for child care as a result of the changes in federal programs, their regulations, and/or funding? _____

_____

_____

_____

19. Are there major problems coordinating child care functions in your state? _____

_____

_____

_____

Thank you for your cooperation!

Sample II
Child Welfare Impact Survey

1. Please identify your state and county or local jurisdiction. _____

2. For the following fiscal years, how many children were in foster care in your county or local jurisdiction?
   FY 81 _____ FY 82 _____ FY 83 _____

3. How many children received preventive services during the following years?
   1981 _____ 1982 _____ 1983 _____

4. What were the numbers of adoptive placements in your county or local jurisdiction?
   1981 _____ 1982 _____ 1983 _____

5. What were the number of subsidized adoptive placements in your county or local jurisdiction?
   1981 _____ 1982 _____ 1983 _____

6. For the following fiscal years, how much money was expended for the following services by your county or local jurisdiction?

   Adoption Services:
   FY 81 _____ FY 82 _____ FY 83 _____

   Foster Care:
   FY 81 _____ FY 82 _____ FY 83 _____

   Preventive Services:
   FY 81 _____ FY 82 _____ FY 83 _____

   Subsidized Adoptions:
   FY 81 _____ FY 82 _____ FY 83 _____

7. Has funding for Foster Care been affected by the Federal budget cutbacks?
   Yes _____ No _____

8. If yes, please explain the effect. _____

_____

_____

_____

9. Has funding for Adoption Services been affected by the Federal budget cutbacks?
   Yes _____ No _____

10. If yes, please explain the effect. _____

_____

_____

11. Have the budget cuts limited or affected your local jurisdiction in implementing the mandates of P.L. 96-272?
   Yes _____ No _____

12. If yes, what has been the effect? _____

_____

_____

_____

13. In planning for your next fiscal year, does your local jurisdiction plan to reduce allocations for any of the following services due to budget cuts?

Adoption Services:
Yes _____ No _____

Foster Care:
Yes _____ No _____

Preventive Services:
Yes _____ No _____

14. Has state pass-through funding to your local jurisdiction been reduced for child welfare services due to budget uts during the last three fiscal years?
Yes _____ No _____

15. If yes, please indicate the reduced amounts and percentages.

FY 81
Amount _____ Percentage _____

FY 82
Amount _____ Percentage _____

FY 83
Amount _____ Percentage _____

Thank you for your cooperation!

Involve Your Community

There are many ways to involve your community in the collective effort to protect our human service programs from the "budget axe." The following is a list of some activities you might initiate or use as a guide with which to develop your own:

1. Conduct budget information seminars and workshops at your local chapter meetings, and ask the leaders of other local chapters of national organizations, community groups, and PTA's to place you on the agenda to speak at their next meeting.

2. Encourage ministers in your local area to discuss the impact of budget cuts on services for Black children.

It would be particularly effective and appropriate for your minister to discuss these concerns during National Black Child Development Week, May 15 through 21.

3. Encourage high school American Government, Civic, and Sociology teachers to facilitate classroom discussions on the community's critical areas of concern and the impact of the Administration's proposals on these areas.

4. Replicate the FY 85 budget chart using local data, and distribute it to community groups.

5. Develop your own state budget cut analysis using this document as a guide.

6. Meet with congressmen/women and senators as well as state legislators to express your concerns and offer information. You can provide your congressional representative with a copy of "Who Bears the Burden?"

7. Invite your public officials (state legislators, school board members, city/county council members, congressmen/women, senators) to meet with their community at a public forum to discuss the impact of the budget cuts on their local area.

8. Conduct letter-writing campaigns, and obtain signatures on petitions.

9. Testify at state legislature, city council, and school board meetings.

10. Schedule television and radio interviews to educate your community on issues that represent your special interest(s).

APPENDIX A:
Descriptions of
Selected Programs

Aid to Families with Dependent Children

The Aid to Families with Dependent Children (AFDC) program was established by Title IV of the Social Security Act of 1935 as a cash assistance program to assist States in caring for low-income children and their caretakers. The Federal government pays fifty percent (50%) of each state's benefit level, which varies by State according to their relative wealth. Until recently, States had unlimited discretion in establishing eligibility and benefit levels. Currently, eligibility criteria are determined jointly by federal and state governments.

The payment of AFDC benefits is mandatory when eligibility requirements are met. At present, AFDC benefits are available to a wide variety of families, ranging from single-parent families where mothers are working, seeking work, or attending school and job training programs, to two-parent families where the main wage earner is unemployed, underemployed, or incapacitated.

In 1967, Congress enacted the Work Incentive (WIN) program which requires adult, able-bodied AFDC recipients, who are not caring for young children, to register for employment and training. At the same time, Congress enacted an "earnings disregard" to encourage recipients to go to work. In 1981, the Omnibus Budget Reconciliation Act of 1981 (P.L. 97-35) was enacted to reduce budget outlays in AFDC. The thrust of the Act was to reduce or end benefits for families with earned income, families with a step-parent in the home, and students beyond the age of 18. These changes significantly affected Black families receiving AFDC benefits because, contrary to a popular stereotype, a large percentage of Black families who received AFDC benefits are wage earners.

Without a viable alternative, the public welfare system must be maintained for the poor and indigent people of this country. The AFDC program provides an important, external economic support for many Black families trying to meet the developmental needs of their children.

Chapter 1 (Title I) Compensatory Education

Title I of the Elementary and Secondary Education Act (ESEA) was a major program of federal assistance to elementary and secondary schools for supplementary compensatory services

to educationally disadvantaged children. With the passage of the Omnibus Reconciliation Act of 1981, it became Chapter 1 of the Education Consolidation and Improvement Act (ECIA).

For the last (sixteen years), Chapter 1/ Title I has provided funds for specially designed supplementary programs for educationally deprived children, mainly in remedial reading and mathematics. In school year 1980-1981, more than five million children received these services; thirty-four percent (34%) of them were Black. This figure is almost double that of the percentage of Black children found in the total public school population -- nineteen percent (19%).

Studies consistently report the sustained positive effects of compensatory education programs for children. The benefits gained by Black children who participate in Chapter 1 are indicated in their improved test scores and their maintenance of achievement gains made over the summer. Chapter 1 students also benefit from a higher level of instructional resources than their non-participating peers and by the active involvement of their parents.

Funds have been distributed on the basis of the number of children from low-income families in the particular school. The allocation process reflects the assumptions that there is a significant correlation between poverty and educational disadvantage, and disadvantaged children most in need are those attending schools serving low-income children.

The gains which have accrued to Black children and their families have been made possible to a great extent, by the targeted nature of compensatory education programs and by federal leadership in monitoring, administrative, and accountability requirements. Such leadership must continue.

Child Nutrition Programs

The solution to the problem of providing proper nutrition for children in school and preschool programs away from home has been the federally supported child nutrition programs. The Child Care Food, School Breakfast, and Summer Food Programs are three of the five programs authorized to operate under various sections of the National School Lunch Act of 1966. The Department of Agriculture administers these

programs on a national level; locally, they are administered by state departments of education.

The Child Care Food Program is the only nutrition program for preschool children. All licensed, approved, or registered family day care homes are eligible for a cash subsidy towards the food for the children under their care. At child care centers, the reimbursement rate for each meal is determined by the income of the participating children's families. In contrast, family day care providers receive a flat reimbursement rate for each allowable meal served.

The School Breakfast Program is the second largest school food program. In FY 82, three million breakfasts were served to children in schools across the U.S. The federal government, through the Department of Agriculture, reimburses schools for every meal served. The reimbursement rate is determined by the incomes of participating families. Eligible schools also receive food commodities from the Department of Agriculture. All public and private, non-profit schools may take advantage of this program.

The Summer Food Program began in 1968 when Congress recognized the importance of extending the School Breakfast and Lunch Programs into the summer months. Under the auspices of the Summer Food Program, cash subsidies are available to sponsoring schools, child care facilities, and other organizations to assist in the purchase and preparation of nutritious meals.

The impact of these programs is noteworthy. With fifty percent (50%) of Black children living in poverty, thousands go to school or day care programs each day hungry and are not adequately provided for during the summer. The nutritious meals provided by the programs guarantee that children who would otherwise go hungry are given a chance to eat properly. In addition, these programs encourage the entry and maintenance of mothers in the work force. It is imperative that child nutrition programs that will help to safeguard the health of Black children and the ability of mothers to work remain intact.

Child Welfare Services

There are three primary program categories contained under the umbrella of the federal

child welfare programs:

The Foster Care Program, authorized by Title IV-E of the Social Security Act, provides matching funds to States for maintenance payments for AFDC-eligible children in foster care. A state's federal share of funds is determined by the state's Medicaid matching rate. The foster care program is an entitlement program although the Adoption Assistance Act of 1980 (P.L. 96-272) imposed a temporary state-by-state ceiling on federal foster care spending for FY 81 through FY 84.

The Adoption Assistance Program, established by Public Law 96-272, was designed to provide federal matching funds, at the State's Medicaid matching rate, for subsidizing families who adopt AFDC eligible children with "special needs" -- characteristics which may impede placement in an adoptive home. Public Law 96-272 also provides a number of protections for a child and his/her family designed to prevent family dissolution and promote family reunification.

The Child Welfare Services and Training Program is a one-hundred-percent (100%) federally funded program. It provides funds to educational institutions, primarily -- schools of social work -- for student assistance and curriculum development in the area of child welfare. This program also provides technical assistance through regional training centers and in-service training programs to assist States in interpreting, implementing, and administering federal child welfare programs.

The child welfare system has traditionally been insensitive to the special needs of Black children. While Black children and youth under nineteen constitute seventeen percent (17%) of the youth population, they comprise thirty-three percent (33%) of the 300,000 children receiving out-of-home care. In addition, in any given year, a Black child has a fifty percent (50%) smaller chance of being adopted than a white child.

Public Law 96-272 provides the federal leadership necessary to encourage States to keep families together, to prevent children from languishing in foster care, and to return children to their homes or find adoptive families for them. Researchers have documented a direct relationship between extended placements in foster care settings and the onset of

emotional and physical problems for children. It is therefore essential that appropriate services are available to place foster children in permanent homes.

Education for All Handicapped Children Act

Applauded as the "Bill of Rights" for handicapped children, the Education of All Handicapped Children Act was the congressional response to allegations of violations of the rights of handicapped children in educational systems throughout the country. Basically, the law requires States and grantees to provide handicapped children from three to eighteen years of age with a "free" and appropriate public education. Additionally, they are required to:

- place handicapped children in the "least restrictive" program appropriate to meet their special needs,
- notify parents before evaluations and placements as well as involve them in all meetings held to plan their child's educational program,
- develop an annual Individualized Educational Program (IEP) for each child, and
- provide grievance procedures for parents to challenge inappropriate placements.

Federal funds are available to defray excess costs incurred in providing educational services to handicapped children.

In its 1982 report to Congress, the Department of Education noted several indications of the success of this program:

- a rise in the number of children and youth receiving special education services,
- provision of services, to a great extent, in regular education buildings, and
- increased numbers if teachers trained to identify children for formal assessment.

Currently, four million children, approximately 625,000 of whom are Black, are participating in state and local special education programs that qualify for federal assistance. Obviously,

then, federal assistance has changed the lives of many handicapped children.

Head Start

A comprehensive program of social, educational, health, and nutritional services to low-income children and their families, Head Start approaches child development from a global perspective. At an average cost of $1,900 per child per year, Head Start programs provide access to health care, adequate nutrition, and social services for children and their families who would otherwise not receive such services. In addition, many Black parents, for the first time, are afforded opportunities to participate in classroom activities, to make decisions on program operations, and to become involved in career development activities.

Since its inception in 1965, Head Start has served over (7.5 million) three - to five-year-old, economically disadvantaged children and their families. In FY 83, 395,000 children participated in Head Start programs; almost half of them were Black.

Studies have consistently documented the positive effects of Head Start on Black children, their parents, and the community. Findings indicate that Head Start:

- contributed significantly to the physical well-being of its children. For example, Head Start children received immunizations at a rate twenty percent (20%) higher than the national average among low-income children, and Head Start children demonstrated improved nutritional practices;

- provided educational benefits which reach well beyond the age of five. Children who attended Head Start were less likely to be in special education classes and more likely to be in the correct grade for their age; and

- enabled 12,000 Head Start parents to receive college training for credit; well over 1,000 have received A.A. or B.A. degrees.

These findings represent only a few of the successes of Head Start. Even though evidence indicates that Head Start does work well, each

year Head Start continues to serve only twenty percent (20%) of the eligible population.

Maternal and Child Health Block Grant

The Title V Maternal and Child Health Block Grant was created with the enactment of Public Law 97-35, the Omnibus Reconciliation Act of 1981. It is intended to perform functions previously carried out by eight federal programs which, prior to FY 83, received funds separately. The programs contained in the block grant include adolescent health services, lead-based paint poisoning prevention, sudden infant death syndrome, and Title V Maternal and Child Health Services.

Rather than providing funds to local agencies for the operation of these programs as was the case previously, the federal government is now making payments to the States which have the authority to determine which programs will be operated, by whom, and at what funding level. The States are only required to assure that mothers and children, particularly those with low incomes or limited access to health care, will have access to these services.

The delivery of adequate and appropriate maternal and child health services is crucial to the Black community; the Black population has higher rates of low-birth-weight babies, malnutrition, and infant mortality than the white population. In addition, the high rate of adolescent motherhood in the Black community tends to increase the frequency at which infants are born with health problems. Twelve percent (12%) of Black women under age 20 who gave birth in 1980 received no prenatal care or received prenatal care only in the third trimester of their pregnancies. The babies of these women are at high risk for malnutrition, anemia, low birth weight, and even mortality. The services provided by the Maternal and Child Health Block Grant have been instrumental in helping low-income Black children and their mothers to receive the health care that they need.

Medicaid

In 1965, the Medicaid program legislated by Title XIX of the Social Security Act, was created by Congress to ensure financial access to health care for the poor by reimbursing clinics, private physicians, hospitals, and

other health care providers for costs incurred in delivering services. Although this medical insurance program is state administered, the federal government finances anywhere between fifty percent(50%) and seventy eight percent (78%) of each state's Medicaid costs, based on the state's per capita income.

Medicaid automatically provides medical coverage to AFDC recipients and, in some states, to low-income persons who are not eligible for AFDC but who cannot afford health care. Recipients are provided with essential health services, such as physical check-ups, prenatal care, hospitalization and medications, and those under 21 are eligible for Early, Periodic Screening, Diagnosis and Treatment (EPSDT) services.

Medicaid is vital to the health of Black children, 50 percent (50%) of whom are poor and have historically suffered from poor nutrition and health care. Forty-seven percent (47%) of Medicaid recipients are Black, 11 million of its 22.5 million participants are children.

Black children from low-income families are reliant on the Medicaid program because their caretakers are. Blacks are generally more vulnerable to economic troubles and tend to hold jobs which are less "recession-proof" than those held by whites. Therefore, Black families are likely to require medical insurance from a source other than an employer, such as Medicaid, during times of economic stress. The Black children who suffer because their parents and guardians are unemployed or in poverty need the comprehensive care provided by Medicaid.

Special Supplemental Food Program for Women, Infants and Children/Commodity Supplemental Food Program

The Special Supplemental Food Program for Women, Infants and Children (WIC) provides 2.25 million low-income, pregnant or nursing women and their children up to age 5 with a voucher to be used for the purchase of essential high protein foods and formulas. For mothers with histories of high blood pressure, anemia, or miscarriages and their children, it offers nutrition education and health services. Study after study has cited this program as a primary reason for the improvement of the health of many Black women and their children in recent years.

The Commodity Supplemental Food Program (CSFP) presently operates along side of or in place of WIC. CSFP distribution projects are frequently established in communities where the receipt of a complete food package is preferable to actually purchasing food. CSFP provides federally purchased commodities to States which in turn distribute them through local agencies to 134,000 low-income, pregnant or nursing women and their children. Statistics from the Department of Agriculture reveal that sixty-nine percent (69%) of CSFP participants in 1981 were Black.

Many Black women and their children desperately need the services that WIC and CSFP provide. Low birth weight, a condition associated with psychological handicaps, occurs frequently in children born of mothers who have had poor prenatal care, inadequate diets, or a history of poor health. In 1980, between twelve percent (12%) and thirteen percent (13%) of Black infants were classified as low-birth-weight babies. The Black population also has a high incidence of infant mortality which can be linked to the poor health care that Black mothers receive. WIC and CSFP are therefore essential to the health of millions of Black mothers and their children.

APPENDIX B:
Glossary of
Budget Terms

Appropriation: A vehicle used by Congress which enables federal agencies to use funds from the Treasury up to a specified amount for a specific purpose. The amount of an appropriation cannot be more than the amount indicated in the corresponding authorization (authorizing legislation).

Authorization (Authorizing Legislation): Legislation which establishes a federal program or agency and sets forth the maximum dollar amount to be spent for that program or agency each year. Authorization is prerequisite for an appropriation.

Block Grant: The consolidation of funding for two or more small categorical programs into one large grant, thereby transferring to the States and localities responsibility for apportioning funds to the different categorical programs.

Budget Authority: The maximum amount of federal funds which can be spent for a program or by an agency during a particular fiscal year.

Entitlement Program: A program for which the payment of benefits to all eligible applicants is required by law. Thus, funding for such a program cannot be capped.

Fiscal Year: The annual accounting period used by the Federal government beginning October 1 and ending September 30 of the following year. Thus, fiscal year 1985 begins October 1, 1984 and ends September 30, 1985.

Outlays: Actual expenditures made to fund a program or agency.

Acknowledgement

This publication was prepared by the following National Black Child Development Institute staff members:

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To assist you, NBCDI can provide up-to-date budget information on Child Welfare, AFDC, Title XX, WIC/ CSFP, Child Nutrition Programs, Head Start, Chapter I, Educating the Handicapped Act, Medicaid, Maternal and Child Health Block Grant.

For more information, please write to NBCDI, 1463 Rhode Island Avenue, N.W., Washington, D.C. 20005.

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